

## General

### Title

Preventive services for adults: percentage of patients over age 86 years who are screened for colorectal cancer.

### Source(s)

Institute for Clinical Systems Improvement (ICSI). Quality improvement support: preventive services for adults. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2014 Sep. 21 p.

## Measure Domain

### Primary Measure Domain

Clinical Quality Measures: Process

### Secondary Measure Domain

Does not apply to this measure

## Brief Abstract

### Description

This measure is used to assess the percentage of patients over age 86 years who are screened for colorectal cancer.

### Rationale

The priority aim addressed by this measure is to decrease the rate of patients who undergo unnecessary screenings.

The U.S. Preventive Services Task Force (USPSTF) recommendations are fully endorsed by the Institute for Clinical Systems Improvement (ICSI) Preventive Services work group:

"Screening for colorectal cancer using fecal occult blood testing, sigmoidoscopy or colonoscopy in adults beginning at age 50 years and continuing until age 75 years. The risks and benefits of these screening methods vary."

"Against routine screening for colorectal cancer in adults ages 76 to 85 years. There may be considerations that support colorectal cancer screening in an individual patient."

"Against screening for colorectal cancer in adults older than age 85 years."

"The evidence is insufficient to assess the benefits and harms of computed tomographic colonography and fecal DNA testing as screening modalities for colorectal cancer."

(USPSTF, 2008)

## Evidence for Rationale

Institute for Clinical Systems Improvement (ICSI). Preventive services for adults. Recommendation table. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 36 p.

Institute for Clinical Systems Improvement (ICSI). Quality improvement support: preventive services for adults. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2014 Sep. 21 p.

U.S. Preventive Services Task Force (USPSTF). Recommendation summary: colorectal cancer: screening. [internet]. Rockville (MD): U.S. Preventive Services Task Force (USPSTF); 2008 Oct [accessed 2015 Feb 16].

## Primary Health Components

Colorectal cancer screening; elderly

## Denominator Description

Number of patients over age 86 years (see the related "Denominator Inclusions/Exclusions" field)

## Numerator Description

Number of patients over age 86 years who were screened for colorectal cancer

## Evidence Supporting the Measure

### Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence

### Additional Information Supporting Need for the Measure

Unspecified

### Extent of Measure Testing

Unspecified

## State of Use of the Measure

## State of Use

Current routine use

## Current Use

not defined yet

# Application of the Measure in its Current Use

## Measurement Setting

Ambulatory/Office-based Care

## Professionals Involved in Delivery of Health Services

not defined yet

## Least Aggregated Level of Services Delivery Addressed

Clinical Practice or Public Health Sites

## Statement of Acceptable Minimum Sample Size

Specified

## Target Population Age

Age greater than 86 years

## Target Population Gender

Either male or female

# National Strategy for Quality Improvement in Health Care

## National Quality Strategy Aim

Better Care

## National Quality Strategy Priority

Health and Well-being of Communities

Prevention and Treatment of Leading Causes of Mortality

# Institute of Medicine (IOM) National Health Care Quality Report Categories

## IOM Care Need

Staying Healthy

## IOM Domain

Effectiveness

## Data Collection for the Measure

### Case Finding Period

The time frame pertaining to data collection is annually.

### Denominator Sampling Frame

Patients associated with provider

### Denominator (Index) Event or Characteristic

Encounter

Patient/Individual (Consumer) Characteristic

### Denominator Time Window

not defined yet

### Denominator Inclusions/Exclusions

Inclusions

Number of patients over age 86 years

Data Collection: From electronic medical records (EMR), review medical records for patients who fit the denominator criteria with an office visit with primary care provider within the last 12 months.

Exclusions

Unspecified

### Exclusions/Exceptions

not defined yet

### Numerator Inclusions/Exclusions

Inclusions

Number of patients over age 86 years who were screened for colorectal cancer

Exclusions

Unspecified

## Numerator Search Strategy

Fixed time period or point in time

## Data Source

Electronic health/medical record

## Type of Health State

Does not apply to this measure

## Instruments Used and/or Associated with the Measure

Unspecified

## Computation of the Measure

### Measure Specifies Disaggregation

Does not apply to this measure

## Scoring

Rate/Proportion

## Interpretation of Score

Desired value is a lower score

## Allowance for Patient or Population Factors

not defined yet

## Standard of Comparison

not defined yet

## Identifying Information

### Original Title

Percentage of patients over age 86 years who are screened.

## Measure Collection Name

Preventive Services for Adults

## Submitter

Institute for Clinical Systems Improvement - Nonprofit Organization

## Developer

Institute for Clinical Systems Improvement - Nonprofit Organization

## Funding Source(s)

The Institute for Clinical Systems Improvement's (ICSI's) work is funded by the annual dues of the member medical groups and five sponsoring health plans in Minnesota and Wisconsin.

## Composition of the Group that Developed the Measure

*Work Group Members:* John Wilkinson, MD (*Work Group Leader*); Charles Bass, MD; Darin Brink, MD; Susan Diem, MD, MPH; Andrea Gravley, RN, MAN, CPNP; Lisa Harvey, RD, MPH; Michael Maciosek, PhD; Leslie C. Milteer, PA-C; Peter Rothe, MD, FACP; Leif Solberg, MD

## Financial Disclosures/Other Potential Conflicts of Interest

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Where there are work group members with identified potential conflicts, these are disclosed and discussed at the initial work group meeting. These members are expected to recuse themselves from related discussions or authorship of related recommendations, as directed by the Conflict of Interest committee or requested by the work group.

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### Disclosure of Potential Conflicts of Interest

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National, Regional, Local Committee Affiliations: None

Guideline-Related Activities: None

Research Grants: None

Financial/Non-Financial Conflicts of Interest: None

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Research Grants: None  
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Financial/Non-Financial Conflicts of Interest: None

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Financial/Non-Financial Conflicts of Interest: None

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Research Grants: None  
Financial/Non-Financial Conflicts of Interest: None

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Guideline-Related Activities: None  
Research Grants: Receives grant monies paid to institution from Patient-Centered Outcomes Research Institute (PCORI) for high-tech imaging, Centers for Medicare and Medicaid Services (CMS) for COMPASS (Care of Mental and Physical and Substance Use Syndromes), Agency for Healthcare Research and Quality (AHRQ) for medical homes  
Financial/Non-Financial Conflicts of Interest: None

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Guideline-Related Activities: None  
Research Grants: None  
Financial/Non-Financial Conflicts of Interest: None

## Adaptation

This measure was not adapted from another source.

## Date of Most Current Version in NQMC

2014 Sep

## Measure Maintenance

Unspecified

## Date of Next Anticipated Revision

Unspecified

## Measure Status

This is the current release of the measure.

The measure developer reaffirmed the currency of this measure in January 2017.

## Measure Availability

Source available from the [Institute for Clinical Systems Improvement \(ICSI\) Web site](#)

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## NQMC Status

This NQMC summary was completed by ECRI Institute on April 17, 2015.

The information was reaffirmed by the measure developer on January 10, 2017.



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## Production

### Source(s)

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